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Effective October 1, 2000											
CLAIMS AS FILED - PART I (Column 1) (Column 2)									OR	OTHER	
AL CLAIMS						RA	ΤE	FEE	1 1	RATE	FEE
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If the difference in column 1 is less than zero, enter					olumn 2			ļ	- 1		-2.0
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Total • Minus • • • FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+12	35=	<u> </u>]	+270=	
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f the entry in cob	rnn 1 is less than t mber Previously P	he entry in col	ıma 2. wri	e Tin co	lumn 3.		DTAL		OR	TOTAL	
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